

FORM

2

Rev
12/05

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE	ET	OE	ES
----	----	----	----

APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

 OIL ☐ GAS ☐ COALBED ☒ OTHER _____
 SINGLE ZONE ☒ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐

 Refiling ☒
 Sidetrack ☐

Document Number:

400076292

Plugging Bond Surety

20010158

3. Name of Operator: BP AMERICA PRODUCTION COMPANY 4. COGCC Operator Number: 100005. Address: 501 WESTLAKE PARK BLVDCity: HOUSTON State: TX Zip: 770796. Contact Name: Susan Folk Phone: (970)335-3828 Fax: (970)335-3837Email: Susan.Folk@bp.com7. Well Name: Clary GU Well Number: 4

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 3227

WELL LOCATION INFORMATION

10. QtrQtr: SWSE Sec: 18 Twp: 34N Rng: 9W Meridian: MLatitude: 37.186940 Longitude: -107.866290
 Footage at Surface: 1099 FNL/FSL FSL 2464 FEL/FWL FEL
11. Field Name: Ignacio Blanco Field Number: 3830012. Ground Elevation: 6376.7 13. County: LA PLATA

14. GPS Data:

Date of Measurement: 01/09/2009 PDOP Reading: 1.7 Instrument Operator's Name: Jeff Chambers15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1652 FSL 1487 FEL 1928 FEL/FWL 1029 FEL
 Sec: 18 Twp: 34N Rng: 9W Sec: 18 Twp: 34N Rng: 9W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 202 ft18. Distance to nearest property line: 155 ft 19. Distance to nearest well permitted/completed in the same formation: 1589 ft

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
Fruitland Coal	FRLDC	112-190	320	S/2

21. Mineral Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian Lease #: _____

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☒ Yes ☐ No Surface Surety ID#: _____

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? ☐ Yes ☒ No

23b. If 23 is No ☒ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bon ☐ \$2,000 Surface Bond ☐ \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
N/2SE/4, Sec 18, T34N, R9W N.M.P.M.

25. Distance to Nearest Mineral Lease Line: 322 ft 26. Total Acres in Lease: 80

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? ☐ Yes ☒ No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? ☐ Yes ☒ No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? ☐ Yes ☒ No

30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)? ☐ Yes ☐ No If 28, 29, or 30 are "Yes" a pit permit may be required.

31. Mud disposal: ☐ Offsite ☒ Onsite

Method: ☐ Land Farming ☐ Land Spreading ☐ Disposal Facility Other: Recycle/Reuse

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	20	350	261	350	
1ST	7+7/8	5+1/2	15.5	3,227	415	3,227	

32. BOP Equipment Type: ☒ Annular Preventer ☒ Double Ram ☒ Rotating Head ☐ None

33. Comments Surface location has moved from original APD location. Site has not been built. SUA is still valid. Waiver to the 30 day notice (Rule 305) & waiver to consultation (Rule 306) can be found in attached SUA. No conductor casing will be used.

34. Location ID: 326617

35. Is this application in a Comprehensive Drilling Plan ? ☐ Yes ☐ No

36. Is this application part of submitted Oil and Gas Location Assessment ? ☒ Yes ☐ No

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Susan Folk

Title: Infill Permit Coordinator Date: _____ Email: Susan.Folk@bp.com

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

API NUMBER

05 067 09733 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

Attachment Check List

Att Doc Num	Name	Doc Description
400076301	WELL LOCATION PLAT	CLARY_GU4 PlatwBHL.pdf
400076302	OTHER	CLARY_GU4_WELLHEAD Distance Plat.pdf
400076303	TOPO MAP	CLARY_GU4_TOPO.pdf
400076304	MINERAL LEASE MAP	Clary GU #4 Min Lease Map.PDF
400076305	SURFACE AGRMT/SURETY	Clary GU #4 SUA.PDF
400076306	DRILLING PLAN	CLARY_GU4 Directional Plan.pdf

Total Attach: 6 Files